

APPLICATION FOR JUDICIAL BRANCH FEDERAL EMPLOYMENT - AO 78

If you need additional space, continue under "Remarks" listing item number

1. Name Last, First, Middle Initial

2. Phone Number

3. Social Security Number

4. Present Address

5. Place of Birth

6. Other names used for employment purposes

7. Date of Birth

City

State

Foreign Country

8. Are you a U.S. Citizen? **G** yes **G** no - Give the Country of your citizenship

9. a. Were you ever a federal civilian employee? **G** yes **G** no - If yes, highest civilian grade/salary: grade/salary

b. Are you receiving a federal annuity or severance payment? **G** yes **G** no

10. Do you have any relatives who are Judges, Officers or employees of the United States Courts? If so give their names, positions, and relationships to you.

11. Have you ever been discharged from a position or asked to resign under the threat of discharge? ☐ yes ☐ no If yes, explain under Remarks.

12. Have you ever been convicted? ☐ yes ☐ no (You may omit: (1) offenses committed before your 18th birthday and adjudicated under a juvenile offender law; (2) offenses adjudicated under a youth offender law; (3) offenses as to which the record has been expunged; (4) minor traffic violations for which you paid a fine of \$100 or less.) If Yes, explain under Remarks.

13. EDUCATION

a. Do you have a high school diploma or G.E.D? ☐ yes ☐ no If yes, Date of Completion

b. Name and location of colleges or universities attended (including law schools)	Dates Attended	Credit Hours		Degree	Date Received	Grade Point Average and/or Scholastic Standing
		Quarter	Semester			
Chief Undergraduate Subjects	Credit Hours		Chief Graduate Subjects			Credit Hours
	Quarter	Semester				Quarter Semester

c. Specify special skills, accomplishments, awards, honors, fraternities, sororities & societies. **G** None

d. Other schools or training such as a trade, vocational, military, or business. Give for each: Name and location of school, dates attended, subject studied, certificates, and other pertinent data.

14. MILITARY SERVICE

a. Have you ever served on active duty with the military? **G** yes **G** no If yes, attach a copy of DD 214, Notice of Separation

b. Are you retired from military service? **G** yes **G** no

APPLICANTS FOR LEGAL POSITIONS

a. Are you admitted to the Bar? **G** yes **G** no If yes, list the bar(s) to which admitted and dates of admission:
Is your Bar membership **G** Active **G** Inactive

b. Did you attend a bar review course? **G** yes **G** no If yes, Dates Attended (month, day, year): from to

WORK EXPERIENCE

Including experience while in military service.

(Start with your present position and work back 10 years. Use additional page if necessary.)

May we ask your present employer about your character, qualifications, and work record? A “NO” will not affect our review of your qualifications. If you answer “NO” and we need to contact your present employer before we can offer you a job, we will contact you first.

☐ Yes ☐ No

A

Dates of Employment (month, day, year)		Number of hours worked per week:		Exact Title of Your Position	
From	To				
Salary or Earnings		Classification Grade/Level	Place of Employment	Kind of Business or Organization	
Starting \$	Per	(If in federal service)	City		
Final \$	Per		State or Country		
Name and Address of Employer (firm, organization, etc.)			Name and Title of Immediate Supervisor		
Business Telephone: Area Code Number					
Reason for Leaving					
Description of Work					

B

Dates of Employment (month, day, year)		Number of hours worked per week:		Exact Title of Your Position	
From	To				
Salary or Earnings		Classification Grade/Level	Place of Employment	Kind of Business or Organization	
Starting \$	Per	(If in federal service)	City		
Final \$	Per		State or Country		
Name and Address of Employer (firm, organization, etc.)			Name and Title of Immediate Supervisor		
Business Telephone: Area Code Number					
Reason for Leaving					
Description of Work					

REMARKS: (Use this space for continuation of answers. List the number of items being continued.)

APPLICANT CERTIFICATION

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated.

SIGNATURE _____ DATE SIGNED _____

CONTINUATION SHEET-AO-78

C

Dates of Employment (month, day, year)		Number of hours worked per week:		Exact Title of Your Position	
From	To				
Salary or Earnings		Classification Grade/Level	Place of Employment	Kind of Business or Organization	
Starting \$	Per	(If in federal service)	City		
Final \$	Per		State or Country		
Name and Address of Employer (firm, organization, etc.)			Name and Title of Immediate Supervisor		
Business Telephone:	Area Code	Number			
Reason for Leaving					
Description of Work					

D

Dates of Employment (month, day, year)		Number of hours worked per week:		Exact Title of Your Position	
From	To				
Salary or Earnings		Classification Grade/Level	Place of Employment	Kind of Business or Organization	
Starting \$	Per	(If in federal service)	City		
Final \$	Per		State or Country		
Name and Address of Employer (firm, organization, etc.)			Name and Title of Immediate Supervisor		
Business Telephone:	Area Code	Number			
Reason for Leaving					
Description of Work					